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MORGAN LEWIS & BOCKIUS LLP 1111 PENNSYLVANIA AVENUE NW WASHINGTON, DC 20004 02/15/2007 HGUTEMA2 00000011 500310

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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/942,941	08/31/2001	Shirley I. Miekka	CI-003	8965
TITLE OF DIVENTION, M	ETHODO FOR OTERM 10	DIG PRESENTATIONS		0705

INVENTION: METHODS FOR STERILIZING PREPARATIONS CONTAINING ALBUMIN APPLN. TYPE SMALL ENTITY ISSUE FEE DUE PUBLICATION FEE DUE PREV. PAID ISSUE FEE TOTAL FEE(S) DUE DATE DUE nonprovisional YES \$700 \$300 \$0 \$1000 02/14/2007 **EXAMINER** ART UNIT **CLASS-SUBCLASS** SMITH, JOHNNIE L 2881 422-022000 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). For printing on the patent front page, list ı Morgan, Lewis (1) the names of up to 3 registered patent attorneys Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. or agents OR, alternatively, (2) the name of a single firm (having as a member a <u>& Bockius LLP</u> Tree Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE	(B) RESIDENCE: (CITY and STATE OR COUNTRY)	
Clearant, Inc.	Los Angeles, CA 90025	
Please check the appropriate assignee category or categories (will not be	e printed on the patent):	
4a. The following fee(s) are submitted:  XXX Issue Fee  XXX Publication Fee (No small entity discount permitted)  XXX Advance Order - # of Copies	4b. Payment of Fec(s): (Please first reapply any previously paid issue fee shown above)  ☐ A check is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached. ☐ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-0310 (enclose an extra copy of this form).	
5. Change in Entity Status (from status indicated above)  a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.	b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1 27(g)(2)	
Include the Issue Fee and Publication Fee (if required) will not be acceptinterest as shown by the records of the United States Patent and Tradem	pted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in ark Office.	
Authorized Signature Augh land	Date February 14, 2007	
Typed or printed name Gregory T. Lowen	Registration No. 46,882	

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